## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000048896

Entity Name: BILLY'S SELF STORAGES, INC.

FILED Jan 16, 2012 Secretary of State

Current Principal Place of Business:  16905 SOUTH US HWY 441 SUMMERFIELD, FL 34491  1651 S.DUNCAN DR TAVARES, FL 32778  Current Mailing Address:  6118 MARKHAM RD SANFORD, FL 32771  1651 S.DUNCAN DR TAVARES, FL 32778  US  FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  Name and Address of Current Registered Agent:  CLEMENT, G EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or boin the State of Florida.				
Current Mailing Address:  6118 MARKHAM RD SANFORD, FL 32771  FEI Number: 11-3700528  FEI Number Applied For ( )  Name and Address of Current Registered Agent:  CLEMENT, G EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757  TAVARES, FL 32778  US  New Mailing Address:  1651 S.DUNCAN DR TAVARES, FL 32778  US  Certificate of Status Desired ( )  Name and Address of New Registered Agent:  Name and Address of New Registered Agent:  TAVARES, FL 32778  US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered office or registered agent, or both the purpose of changing its registered agent.	Current Principal Place of Business:	New Principal Place o	New Principal Place of Business:	
6118 MARKHAM RD SANFORD, FL 32771  TAVARES, FL 32778  FEI Number: 11-3700528  FEI Number Applied For ( )  Name and Address of Current Registered Agent:  CLEMENT, G EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757  US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both sales and statement for the purpose of changing its registered office or registered agent, or both sales agent, agent sales agent, or both sales agent, agent sales agent, or both sales agent sales agent, or both sales agent sales agent, agent sales agent, agent sales agen			US	
SANFORD, FL 32771  TAVARES, FL 32778  US  FEI Number: 11-3700528  FEI Number Applied For ( )  Name and Address of Current Registered Agent:  CLEMENT, G EDWARD  308 EAST FIFTH AVENUE  MOUNT DORA, FL 32757  US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both	Current Mailing Address:	New Mailing Address:	:	
Name and Address of Current Registered Agent:  CLEMENT, G EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both			US	
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308 EAST FIFTH AVENUE MOUNT DORA, FL 32757 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both	Name and Address of Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	308 EAST FIFTH AVENUE			
		rpose of changing its registered	office or registered agent, or both,	
SIGNATURE:	SIGNATURE:			
Electronic Signature of Registered Agent Date	Electronic Signature of Registered Agen	t	Date	
	OFFICERS AND DIRECTORS:			

Title:

Name: LIATSOS, GEORGE K 1651 S.DUNCAN DR. Address: City-St-Zip: TAVARES, FL 32778 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GEORGE K LIATSOS D 01/16/2012